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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/698,553
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	First Named Inventor	Sanford, Kirk
	Art Unit	2876
	Examiner Name	Cyr
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ENCLOSURES (Check all that apply)		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Sue Z. Shaper
Signature	<i>Sue Shaper</i>
Date	November 22, 2004

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